

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :
CLUB FOR GROWTH PAC

10/17/2008 10 : 56

2001 L ST NW SUITE 600

WASHINGTON

DC

20036

FEC ID No. C00432260☒ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)****ITEMIZED INDEPENDENT EXPENDITURES**

PAGE OF 1 / 8

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
CLUB FOR GROWTH PAC**FEC IDENTIFICATION NUMBER****C** C00432260Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Club for Growth

Date

M M / D D / Y Y Y Y
0 9 / 1 1 / 2 0 0 8

Amount

160.67

Mailing Address

2001 L St., NW

Ste. 600

City

Washington

State

DC

Zip Code

20036

Purpose of Expenditure
mail costs (from adv-
ance line 21)Category/
TypeOffice Sought: ☒ House

State: ID

☐ Senate

District: 01

☐ PresidentialCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____**Transaction ID:** SE.82424

Calendar Year-To-Date Per Election

1223.22

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Club for Growth

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 8

Amount

19.05

Mailing Address

2001 L St., NW

Ste. 600

City

Washington

State

DC

Zip Code

20036

Purpose of Expenditure
mail costs (from adv-
ance line 21)Category/
TypeOffice Sought: ☒ House

State: ID

☐ Senate

District: 01

☐ PresidentialCheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____**Transaction ID:** SE.82426

Calendar Year-To-Date Per Election

1252.16

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

179.72

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Pat Toomey

Signature

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE OF 2 / 8
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH PAC			FEC IDENTIFICATION NUMBER C C00432260		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Club for Growth			Date M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 8		
Mailing Address 2001 L St., NW Ste. 600			Amount 7.04		
City Washington	State DC	Zip Code 20036	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure mail costs (from advance line 21)		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.82421		

Full Name (Last, First, Middle, Initial) of Payee Club for Growth			Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 8		
Mailing Address 2001 L St., NW Ste. 600			Amount 278.90		
City Washington	State DC	Zip Code 20036	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure email costs (from advance line 21)		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.82414		

(a) SUBTOTAL of Itemized Independent Expenditures	285.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Pat Toomey Signature	M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
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NAME OF COMMITTEE (In Full) CLUB FOR GROWTH PAC		FEC IDENTIFICATION NUMBER C C00432260	
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Club for Growth		Date M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 8	
Mailing Address 2001 L St., NW Ste. 600		Amount 287.36	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure mail costs (from advance line 21)		Category/ Type	
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI		Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
1838.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____	
		Transaction ID: SE.82418	
Full Name (Last, First, Middle, Initial) of Payee Club for Growth		Date M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 8	
Mailing Address 2001 L St., NW Ste. 600		Amount 131.91	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure mail costs (from advance line 21)		Category/ Type	
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI		Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
5855.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____	
		Transaction ID: SE.82413	

(a) SUBTOTAL of Itemized Independent Expenditures	419.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Pat Toomey Signature	M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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☐ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)
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NAME OF COMMITTEE (In Full) CLUB FOR GROWTH PAC			FEC IDENTIFICATION NUMBER C C00432260		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Club for Growth			Date M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 8		
Mailing Address 2001 L St., NW Ste. 600			Amount 51.99		
City Washington	State DC	Zip Code 20036	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure mail costs (from advance line 21)		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.82417		
			6601.53		

Full Name (Last, First, Middle, Initial) of Payee Club for Growth			Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8		
Mailing Address 2001 L St., NW Ste. 600			Amount 196.45		
City Washington	State DC	Zip Code 20036	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure mail costs (from advance line 21)		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.82433		
			6797.98		

(a) SUBTOTAL of Itemized Independent Expenditures	248.44
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Pat Toomey Signature	M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
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NAME OF COMMITTEE (In Full) CLUB FOR GROWTH PAC			FEC IDENTIFICATION NUMBER C C00432260		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Paul and Partners			Date M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 8		
Mailing Address 43670 Trade Center Place			Amount 1062.55		
City Dulles	State VA	Zip Code 20166	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure mail costs, postage		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought		1062.55	Transaction ID: SE.82422		
Full Name (Last, First, Middle, Initial) of Payee Paul and Partners			Date M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 8		
Mailing Address 43670 Trade Center Place			Amount 13.05		
City Dulles	State VA	Zip Code 20166	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure mail costs, postage		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought		1265.21	Transaction ID: SE.82420		

(a) SUBTOTAL of Itemized Independent Expenditures	1075.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Pat Toomey Signature	M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH PAC			FEC IDENTIFICATION NUMBER C C00432260		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Paul and Partners			Date M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 8		
Mailing Address 43670 Trade Center Place			Amount 2362.18		
City Dulles	State VA	Zip Code 20166	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure mail costs, postage		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.82419		
4200.69					
Full Name (Last, First, Middle, Initial) of Payee Paul and Partners			Date M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 8		
Mailing Address 43670 Trade Center Place			Amount 1522.70		
City Dulles	State VA	Zip Code 20166	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure mail costs, postage		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought			Transaction ID: SE.82411		
5723.39					

(a) SUBTOTAL of Itemized Independent Expenditures	3884.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Pat Toomey Signature	M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
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NAME OF COMMITTEE (In Full) CLUB FOR GROWTH PAC			FEC IDENTIFICATION NUMBER C C00432260		
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee Paul and Partners			Date M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8		
Mailing Address 43670 Trade Center Place			Amount 1449.54		
City Dulles	State VA	Zip Code 20166	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure mail costs, postage		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought		8247.52	Transaction ID: SE.82434		
Full Name (Last, First, Middle, Initial) of Payee Strive Communications			Date M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 8		
Mailing Address 2602 Windwood Drive			Amount 694.24		
City Winchester	State VA	Zip Code 22601	Office Sought: <input checked="" type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential		
Purpose of Expenditure mail costs, postage		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: WILLIAM T. SALI			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____		
Calendar Year-To-Date Per Election for Office Sought		6549.54	Transaction ID: SE.82415		

(a) SUBTOTAL of Itemized Independent Expenditures	2143.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Pat Toomey Signature	M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8

24 / 48 HOUR NOTICE OF INDEPENDENT EXPENDITURE, on :

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☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
CLUB FOR GROWTH PAC

FEC IDENTIFICATION NUMBER

C C00432260

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

USPS

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 8Mailing Address
2001 M ST NW

Amount

9.89

City State Zip Code
Washington DC 20036Purpose of Expenditure
postageCategory/
TypeOffice Sought: ☒ House State: ID
☐ Senate District: 01
☐ PresidentialName of Federal Candidate supported or Opposed by expenditure:
WILLIAM T. SALICheck One: ☒ Support ☐ OpposeDisbursement For: ☐ Primary ☒ General 2008☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 1233.11

Transaction ID: SE.82425

(a) SUBTOTAL of Itemized Independent Expenditures

9.89

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

8247.52

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Pat Toomey

Signature

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8